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ABS ✓
 1st ✓
 Draw 20
 Claim depmt ✓

**** CONTINUING DATA *******
 This application is a CON of 10/006,624 11/30/2001 PAT 6,680,315
 which is a CIP of 09/594,362 06/15/2000 PAT 6,384,032

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
**** 12/01/2003**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 0	TOTAL CLAIMS 2	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged	Examiner's Signature Initials		

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 26161
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TITLE
 Triazine compounds

☐ All Fees

FILING FEE RECEIVED 1200	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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